

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response.....16.00



UNIFO	RM LIMITED OFFERING EXEM	PTION L
	ment and name has changed, and indicate change.)	06047701
Patriot Energy Group 2006-A Filing Under (Check box(es) that apply): R Type of Filing: New Filing Amendment	ule 504	
	A. BASIC IDENTIFICATION DATA	
I. Enter the information requested about the issu	er	
Name of Issuer (check if this is an amendment PATRIOT OIL & GAS LLC	t and name has changed, and indicate change.)	
Address of Executive Offices 1120 W. Campbell Road, Suite 103	(Number and Street, City, State, Zip Code) Richardson, Texas 75080	Telephone Number (Including Area Code) (972) 671-2259
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Tetephone Number (Including Area PROCES)
Brief Description of Business Oil and gas exploration and drilling		SEP 2 5 20
	ed partnership, already formed working other (please specify) Lest Abrit Perticipation
	Month Year ization: 0 9 0 2 Actual Estiner two-letter U.S. Postal Service abbreviation for State N for Canada, FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of sec 77d(6).	curities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than	15 days after the first sale of securities in the offering	. A notice is deemed filed with the U.S. Securities

and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate lederal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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SEC 1972 (6-02)

		А. В	ASIC IDE	VTIF	ICATION DATA		:		
2. Enter the information reque	sted for the foll	lowing:							
 Each promoter of the i 	ssuer, if the iss	uer has been or	ganized with	hin t	he past five years:				
Each beneficial owner:	having the powe	er to vote or dis	pose, or dire	ct the	vote or disposition	of, 10	% or more o	faclas	s of equity securities of the issuer.
Each executive officer	and director of	corporate issu	ers and of co	orpor	rate general and man	aging	partners of	partne	ership issuers; and
Each general and mana	aging partner of	partnership is:	suers.						
Check Box(es) that Apply:	Promoter	Beneficia	al Owner		Executive Officer		Director	7	General and/or
_	-	_				_		_	Managing Partner
Full Name (Last name first, if inc PATRIOT OIL & GAS LLC	dividual)		, <u>,,,,</u>						
Business or Residence Address 1120 W. Campbell Road, Su				-					
Check Box(es) that Apply:	Promoter	Beneficia	al Owner	Z	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if in	dividual)								
Cunningham, Don									
Business or Residence Address	(Number and S	Street, City, Sta	te, Zip Cod	e)	· · · · · · · · · · · · · · · · · · ·				
l 120 W. Campbell Road, Sui	te 103, LB 3,	Richardson,	Texas 750	080					
Check Box(es) that Apply:	Promoter	Beneficia	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if incallen, James C.	dividual)								
Business or Residence Address	(Number and S	Street, City, Sta	ste, Zip Cod	c)					
1120 W. Campbell Road, Sui	ite 103, LB 3,	Richardson,	Texas 750	080					
Check Box(es) that Apply:	Promoter	☐ Beneficia	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if inc	dividual)								
Business or Residence Address	(Number and S	Street, City, Sta	te, Zip Code	c)					
Check Box(es) that Apply:	Promoter	Beneficia	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if inc	tividual)								
Business or Residence Address	(Number and S	Street, City, Sta	ite. Zip Code	e)					
Check Box(es) that Apply:	Promoter	Beneficia	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if inc	dividual)								
Business or Residence Address	(Number and S	Street, City, Sta	ite, Zip Code	e)	,				
Check Box(es) that Apply:	Promoter	Beneficia	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if inc	dividual)								
Business or Residence Address	(Number and S	Street, City, Sta	nte, Zip Codi	c)					
	(Use blan	k sheet, or cop	y and use ad	ditio	onal copies of this sh	neet, a	s necessary)	

					B. I	NFORMAT	ION ABOU	T OFFERI	NG		g ge	44,1	
	lles the		dd			11 to some			- 4L: 65	:0		Yes	No
1.	rias inc	ISSUET SOF	d, or does t			n, to non-a Appendix					***************************************		
2.	What is	the minin	num investn									s 27,	500.00
						•	•					Yes	No
3.			permit join										
4.	or state:	sion or sim son to be lis s, list the n	ilar remune ited is an as:	ration for s sociated pe roker or de	solicitation erson or age ealer. If mo	of purchas ent of a brok ore than fiv	ers in conne cer or deale c (5) person	ection with or registered ns to be list	sales of sed with the Sed are asso	curities in t SEC and/or	irectly, any he offering. with a state sons of such		
	•	Last name up Securiti	first, if ind	ividual)									
			Address (N	lumber and	d Street Ci	ity. State 7	in Code)						
			ad, Suite 1			-	sip code,						
Nan	ne of As	sociated Bi	roker or De	aler									
Stat	es in Wh	ich Persor	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
Jiai			s" or check									A1	States
	AL	AK	A/Z	AR	CA	CO	CT	DE	DC	EL	GA	HI	ĪD
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE.	NV	[NH]	NJ	NM	NY	NC	ND	QH		OR	PA
	RI	[SC]	SD	TN	TOX	UT	VT	VA	WA	WV	WI	WY]	PR
Full	Name (Last name	first, if ind	ividual)			···						
Bus	iness or	Residence	: Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nan	ne of Ass	sociated B	oker or De	aler									
Stat	es in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers	 					
	(Check	"All States	or check	individual	States)		•••••				•••••	☐ Ail	States
	(ĀT)	[AV]	[42]	(AD)	CA	[CO]	CT	(DE)	DC	FL	GA		ΙD
	[AL]	AK IN	[AZ]	KS	KY	LA	CT ME	DE MD	DC MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	Name (Last name	first, if ind	ividual)									
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nan	ne of Ass	sociated Br	oker or De	aler			<u> </u>						
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check "All States" or check individual States)										☐ All	States		
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI		MS	MO
	MT	NE SC	NV SD	NH	NJ	NM UT	NY VT	NC VA	ND WA	[OH]		OR WY	PR
	RI	SC	SD	TN	TX	UT	VT	VA	$\mathbf{W}\mathbf{A}$	WV	4,11	لئين	لخنيا

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	
	☑ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify Working Interest Direct Participation	\$ 2,200,000.00	\$_385,000.00
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 385,000.00
	Non-accredited Investors		\$_0.00
	Total (for filings under Rule 504 only)	10	\$ 385,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	🔲	\$
	Printing and Engraving Costs		\$
	Legal Fees	<u>-</u>	s
	Accounting Fees		\$
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		\$ 38,500.00
	Other Expenses (identify) Organizational Costs	_	± 10.250.00
	Total		\$ 57,750.00
		_	

	C. OFFERING PRICE	E, NUMBER OF INVESTORS, EXPEN	SES AND USE OF PROCEEDS	Le spig sign
	b. Enter the difference between the aggrega and total expenses furnished in response to Pa proceeds to the issuer."	art C - Question 4.a. This difference is	s the "adjusted gross	2,142,250.00 \$
5.	Indicate below the amount of the adjusted greach of the purposes shown. If the amoun check the box to the left of the estimate. The proceeds to the issuer set forth in response	t for any purpose is not known, furni total of the payments listed must equa	ish an estimate and	
			Payments to Officers, Directors, & Affiliates	
	Salaries and fees			_ 🗆 \$
	Purchase of real estate		\$	_ 🗆 \$
	Purchase, rental or leasing and installation	of machinery		
	and equipment		- "	
	Construction or leasing of plant buildings			_
	Acquisition of other businesses (including offering that may be used in exchange for t	the assets or securities of another		
	issuer pursuant to a merger)		\ <u></u>	
	Repayment of indebtedness			
	Working capital		-	- - -
	Other (specify):		🗆 \$	- 🗆 s
				_
	Column Totals		s 0.00	s0.00
	Total Payments Listed (column totals adde			0.00
_		D. FEDERAL SIGNATUI	RE	
ig	e issuer has duly caused this notice to be signed nature constitutes an undertaking by the issue information furnished by the issuer to any n	er to furnish to the U.S. Securities and	Exchange Commission, upon writ	
SS	uer (Print or Type)	Signature	Date	
PA	TRIOT OIL & GAS LLC		7.	15.200
Va:	me of Signer (Print or Type) nes C. Allen	Title of tigner (Print or Typ Manager		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE								
1.		0.262 presently subject to any of the disqualification		Yes	No K					
		See Appendix, Column 5, for state response.								
2.	The undersigned issuer hereby undert D (17 CFR 239.500) at such times as	akes to furnish to any state administrator of any state in whic s required by state law.	h this notice is f	iled a no	tice on Form					
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	limited Offering Exemption (ULOE)	at the issuer is familiar with the conditions that must be sa of the state in which this notice is filed and understands that establishing that these conditions have been satisfied.								
	er has read this notification and knows thorized person.	the contents to be true and has duly caused this notice to be si	gned on its beha	lf by the	undersigned					
Issuer (Print or Type)	Signatue	ate							
PATRIC	OT OIL & GAS LLC		9.1	1	2006					
Name (1	Print or Type)	Title (Print or Type)			 -					
James	C. Allen	Manager								

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1									للمشميم					
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in Sta (Part C-Item 2)		Type of investor and amount purchased in State					e of investor and t purchased in State		Disqual under Sta (if yes, explana waiver	diffication ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Number of Number of Accredited Non-Accredited									
AL														
AK	×		Working Interest	3	\$165,000.00		<u></u>							
AZ	×		Working Interest	1	\$27,500.00				×					
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CA														
со														
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FL	×		Working Interest	2	\$55,000.00				×					
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				APP	ENDIX				e# .	
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Number of Number of Accredited Non-Accredited					
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				APP	ENDIX				- 19 Page					
1		2	3 4					Disqua	lification					
	to non-a	d to sell accredited rs in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	e Type amount		Type of investor and amount purchased in State (Part C-Item 2)					unt purchased in State			attach attach attion of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No					
WY														
PR														